

WORTLEY

Rural District Council.

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ANNUAL

REPORT

For the Year 1904.

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ALEXANDER ANDERSON,

M.A., M.B., D.P.H.,

Medical Officer of Health.

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TO THE CHAIRMAN AND MEMBERS OF THE WORTLEY RURAL  
DISTRICT COUNCIL.

GENTLEMEN,

I beg to submit my Annual Report for the year 1904.

The health of the district during 1904 has, like that of the country generally, not been in some respects so good as in 1903. The general death rate, which was 14.3 per 1000 of the population, as compared with 13.2 in 1903, was still, however, below the average for the previous ten years. It is satisfactory to note that, though old people died in somewhat larger numbers, the infantile mortality, which is a valuable index of the sanitary condition of a district, was lower than in any year of the past decade except 1902. The zymotic death rate was also below the average.

The vital statistics may be usefully presented alongside those of England and Wales, the population of which in its age and sex constitution is strictly comparable with that of the Wortley District :—

	Wortley Rural District	England and Wales
Death Rate per 1000 of the population	.. 14.3	.. 16.2
Birth Rate                   ,,                   ,,	.. 30.9	.. 27.9
Zymotic Death Rate   ,,                   ,,	.. 1.33	.. 1.94
Infantile Mortality per 1000 births   ..	.. 122	.. 146

It will be observed that the birth rate for the district has not been so low since 1895, while that for England and Wales is the lowest on record.

I am,

Your obedient Servant,

ALEXANDER ANDERSON.

MARCH 3RD, 1905.

# REPORT FOR THE YEAR 1904.

## I.—VITAL STATISTICS.

**Population.**—The population of the district, estimated to the middle of 1904, on the basis of the intercensal rate of increase, was 30,698. This is probably an under-estimate, as the natural increase of the population (i.e., the excess of births over deaths) was 509, while the estimated increase is only 323. The natural increase during the three years 1902-1904 was 1637, while the estimated increase since the census of 1901 is only 1033. Immigration into the district probably exceeds, as in previous years, emigration from it, so that the discrepancy between the actual and the estimated population becomes greater the further removed from the census year is the one under review.

TABLE A.

Acreage, Population, and Inhabited Houses in the various Parishes, 1891 and 1901.

Parish	Acreage	Inhabited Houses		Persons per house		POPULATION		
		1891	1901	1891	1901	Census 1891	1901	Estimated to middle 1904
Ecclesfield	9,368	2,892	3,420	5.7	5.3	16,665	18,324	18,898
Bradfield	34,780	1,331	1,465	5.0	5.4	6,728	7,916	8,345
Tankersley	2,465	357	428	6.2	5.6	2,216	2,423	2,494
Wortley	5,617	211	200	5.3	5.0	1,138	1,002	961
Whole								
District	52,230	4,791	5,513	5.5	5.3	26,747	29,665	30,698

The **Births** registered during the year numbered 949, equivalent to a birth rate of 30.9 per 1000 of the population. Of the births, 494 were males and 455 females. The birth rate has not been so low since 1895, the average rate for the previous ten years being 31.5. The birth rate for the whole of England and Wales was only 27.9, which is the lowest on record. The decline in the birth rate for the country has been progressive since 1876, when the rate was 36.3 per 1000.



The birth rate in Ecclesfield was 33.5, in Bradfield 25.6, in Tankersley 30.4, and in Wortley 26.0.

There were 39 illegitimate births, equal to a rate of 41 per 1000 births.

The total number of **Deaths** registered was 600, equal to a death rate of 19.5 per 1000 of the population. This does not, however, represent the true local death rate, as the deaths of non-residents in local institutions have to be deducted and the deaths of residents occurring in outlying institutions have to be added. At the South Yorkshire Asylum, 176 deaths occurred, of which 170 were those of non-residents, and at the Grenoside Workhouse one death occurred of a person previously resident in the Stocksbridge Urban District. On the other hand, 11 deaths occurred of persons previously resident in the Wortley District in the following hospitals:—Royal Infirmary, Sheffield, 6; Jessop Hospital, 1; Firvale Workhouse Infirmary, 2; Royal Infirmary, Manchester, 1; Barnsley Hospital, 1.

The **Nett Deaths**, therefore, belonging to the district numbered 440, equivalent to a death rate of 14.3 per 1000 of the population. The average rate for the previous ten years was 14.7. The rates for the years 1903 and 1902 were 13.2 and 13.7 respectively. The death rate for 1904 was thus higher than the rate for the two immediately preceding years, but the mortality in England and Wales has also increased from 15.4 in 1903 to 16.2 in 1904. The local mortality is still lower than that of the country generally, and is even lower than that of Rural England and Wales, which was 15.3

In the sub-districts the rates were:—Ecclesfield, 15.4; Bradfield, 11.8; Wortley, 9.3; Tankersley, 16.0.

There were 15 uncertified deaths, and inquests were held in 22 instances.

**Age Mortality.**—The deaths at selected age periods are shown in the following table, along with the death rates per 1000 of the population living at the various age periods. As compared with the previous year, the mortality at ages under 5 years has decreased, but at all other ages there has been an increase.

**TABLE B.**

Deaths and Death Rates at selected age periods.

Age	Population estimated to middle 1904	Deaths	Death rate per 1000
Under 1 year .. ..	814	115	141.2
1 „ 5 years .. ..	3,103	42	13.5
5 „ 15 „ .. ..	6,629	28	4.2
15 „ 25 „ .. ..	5,752	20	3.5
25 „ 65 „ .. ..	13,121	124	9.4
65 and over .. ..	1,279	111	86.7
All ages .. ..	30,698	440	14.3

**Infantile Mortality.**—The deaths of infants under one year of age numbered 115. Stated in proportion to the number of births, the infantile mortality was 122 per 1000 births. The average rate for the previous ten years was 140, and the rate in England and Wales during 1904 was 146.

The rates in the sub-districts were :—Ecclesfield, 137 ; Bradfield, 84 ; Wortley, 80 ; Tankersley, 105.

Of the infantile deaths, 20 per cent. were due to Premature Birth ; 19 per cent. to Developmental diseases ; 18 per cent. to Bronchitis and Pneumonia ; 17 per cent. to Diarrhœa and Enteritis ; and 4 per cent. to infectious diseases, chiefly Whooping Cough.

Of the deaths between one and five years, 50 per cent. were caused by respiratory diseases, and 16 per cent. by infectious diseases.

**TABLE C.**

Deaths from certain groups of diseases at selected age periods.

	Under 1 year	1 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 65 years	65 and over	All Ages
Diarrhœa .. ..	12	2	—	—	—	—	14
Other Zymotics ..	5	7	10	2	3	—	27
Tubercular Diseases .. ..	5	2	2	5	25	3	42
Respiratory Diseases .. ..	21	21	1	1	21	19	84
Cancer .. ..	—	—	—	—	10	7	17
Heart Diseases ..	—	—	3	1	17	22	43
Nervous Diseases ..	13	5	5	1	14	18	56
Other Causes ..	59	5	7	10	34	42	157
Total .. ..	115	42	28	20	124	111	440

**Tubercular Diseases.**—Pulmonary Tuberculosis caused 31 deaths, and other forms of tubercular disease 11 deaths, the combined rate being 1.3 per 1000 of the population. The rate for Tuberculous Phthisis alone was 1.01 for the whole district, and for the sub-districts :—Ecclesfield, 1.1 ; Bradfield, 0.84 ; Tankersley, 1.2 ; Wortley, nil. It is worthy of note that no death from Tuberculous Phthisis has occurred in Wortley parish during the last four years.

Of the 31 deaths from Phthisis, 21 were those of males and 10 those of females. The male mortality from Phthisis is thus greatly in excess of the female, due in large part to the deleterious influence of many of the occupations of males in the district.

The deaths and death rates from Phthisis in previous years are shown thus :—

Year	..	1894	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904
Deaths	..	42	51	43	42	47	38	35	41	20	33	31
Death rate per 1,000	}	1.05	1.2	1.03	0.98	1.08	0.85	0.76	0.93	0.66	1.08	1.01

As compared with the previous year, there has been a slight decrease in the mortality from Phthisis, but the rate is still higher than the average for the previous ten years, which was 0.97 per 1000.

Of the 31 deaths, 18 were registered as being due to Pulmonary Tuberculosis or Tuberculous Phthisis, and 13 to Phthisis without any further definition. There is thus some improvement as regards the more accurate certification of deaths from tubercular disease of the lung, but I regret that the facilities at the disposal of practitioners for the examination of specimens of sputum at the County Laboratory have not been utilised to any great extent in this district.

**Respiratory Diseases.**—84 deaths were caused by Pneumonia, Bronchitis, and other respiratory diseases, 21 of which occurred amongst infants under one year of age. The total respiratory rate was 2.7 per 1000 of the population, exactly the same rate as in the previous year.

The rates in the sub-districts were :—Ecclesfield, 3.1 ; Bradfield, 2.1 ; Tankersley, 2.8 ; Wortley, nil.



**Malignant Diseases.**—17 deaths were caused by malignant diseases, of which 16 were ascribed to Cancer and 1 to Sarcoma. The death rate was 0.55 per 1000, as compared with 0.82 in the previous year.

**Influenza** caused only one death. This disease prevailed in the district during the last quarter of the year, but was of a comparatively mild type.

**Zymotic Diseases**, which embrace the seven principal epidemic diseases, caused 41 deaths, equivalent to a rate of 1.33 per 1000 of the population. The average rate for the previous ten years was 1.93. The rates in the sub-districts were :—Ecclesfield, 1.5 ; Bradfield, 0.84 ; Tankersley, 2.0 ; Wortley, nil.

**TABLE D.**

ZYMOTIC DISEASES—Death rates per 1000 of the population for the year 1904, and average rates for previous ten years, 1894-1903.

Disease.			1894-1903.		1904.
Scarlet Fever	..	..	0.13	..	0.13
Diphtheria	..	..	0.52	..	0.16
Measles	..	..	0.29	.	0.03
Whooping Cough	..	..	0.23	..	0.29
Typhoid Fever	..	..	0.11	..	0.26
Typhus Fever	.	..	nil	..	nil
Diarrhœa	..	..	0.64	..	0.45
Total Zymotics			1.93	..	1.33

In England and Wales the Zymotic death rate in 1904 was 1.94 per 1000 of the population.

## II.—PREVALENCE AND FATALITY OF INFECTIOUS DISEASES.

### 1.—Notifiable Diseases.

During the year, 165 cases of infectious disease were notified, equal to a sickness rate of 5.32 per 1000 of the population. The average rate for the previous ten years was 7.15. The sickness rates in the sub-districts were :—Ecclesfield, 5.3 ; Bradfield, 5.9 ; Tankersley, 4.0 ; Wortley, 5.2.



**TABLE E.**

NOTIFIABLE DISEASES.—Attack rates per 1000 of the population for the year 1904 and average rates for previous ten years, 1894-1903.

Disease.			1894-1903.		1904.
Scarlet Fever	..	..	4.4	..	3.1
Diphtheria	..	..	1.54	..	1.07
Typhoid Fever	..	..	0.61	..	0.71
Typhus Fever	..	..	nil	..	nil
Erysipelas	..	..	0.52	..	0.32
Puerperal Fever	..	..	0.06	..	0.06
Small-pox	..	..	0.007	..	0.06
Total	..	..	7.15	..	5.32

The above table shows that Scarlet Fever and Diphtheria have been less prevalent, Typhoid Fever and Small-pox slightly more prevalent, than the average of the previous ten years.

**Scarlet Fever.**—Sicknesses and Deaths in previous ten years and percentage of cases removed to hospital.

Year	..	1894	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904
Cases	..	40	48	115	215	314	267	397	163	74	139	96
Deaths	..	1	1	3	10	11	9	13	1	1	2	4
Fatality per cent.	..	2.5	2.0	2.6	4.6	3.5	3.3	3.2	0.6	1.3	1.4	4.1
Percentage removals to Hospital		25	14	73	61	67	55	49	63	78	74	92

There were 96 cases of Scarlet Fever notified during the year, and 4 deaths occurred, equal to a fatality rate of 4.1 per cent. The percentage of cases removed to hospital was much larger than in any previous year.

In the Ecclesfield sub-district, 69 cases occurred, equal to an attack rate of 3.6 per 1000 of the population. The locality chiefly affected was Wadsley Bridge and Birley Carr, where 33 cases occurred. Those parts of the district adjoining the City of Sheffield might have been expected to have suffered more severely, as a severe epidemic prevailed in Sheffield during the latter half of the year. The other populous localities did not suffer much, only 10 cases having occurred at Chapeltown, 9 at Ecclesfield, 3 at High-green, 6 at Grenoside, 6 at Thorpe Hesley, 1 at Shiregreen, and 1 at the South Yorkshire Asylum.

In the Bradfield sub-district, 25 cases occurred, equal to an attack rate of 2.9 per 1000. Twelve cases occurred at Loxley and Wisewood, 8 at Stannington, 1 at Dungworth, 2 at Oughtibridge, 1 at Worrall, and 1 at Hollow Meadows.

In Tankersley and Wortley only one case occurred in each parish.

TABLE F.

MONTHLY NOTIFICATIONS OF SCARLET FEVER.

Sub-districts	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Ecclesfield..	5	5	2	4	4	1	8	6	2	11	7	14	69
Bradfield ..	2	4	3	—	—	1	1	2	1	—	5	6	25
Tankersley..	—	—	—	—	—	—	—	1	—	—	—	—	1
Wortley ..	—	—	1	—	—	—	—	—	—	—	—	—	1
Whole Dist.	7	9	6	4	4	2	9	9	3	11	12	20	96

**Diphtheria and Membranous Croup.**—Sicknesses and Deaths in previous years.

Year ..	1894	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904
Cases ..	37	32	21	18	19	89	243	120	27	13	33
Deaths ..	10	17	11	10	13	23	86	29	6	5	5
Fatality per cent. }	27.2	53.1	52.3	55.5	68.4	25.8	35.3	24.1	22.2	38.4	15.1

There were 33 cases of Diphtheria notified during the year, of which 5 died, giving the fatality rate of 15.1 per cent. The attack rate was somewhat higher than in 1903, chiefly due to recurrence of the disease at Wharncliffe Side, but it is satisfactory to note a considerable decrease in the fatality rate. The increasing use of Antitoxin in the early stages of the disease has no doubt largely contributed to this decline in the death rate. At Wharncliffe Side, where I believe almost every case was promptly treated with Antitoxin, no death resulted.

In the Ecclesfield sub-district only 5 cases were notified. Of these, 2 occurred at Ecclesfield, 1 at Wadsley Bridge, 1 at High-green, and 1 at Shiregreen.

In Bradfield sub-district 19 cases were notified, 11 occurring at Wharncliffe Side, 6 at Upper Midhope, and 2 at Oughtibridge.

In Tankersley there were 8 cases, and in Wortley 1 case.

The recurrence of Diphtheria at Wharncliffe Side after two years' absence presents points of some interest. This village had been visited with Diphtheria in epidemic form in the year 1900 (April

to October) and in 1901 (May to December), 26 cases with 8 deaths having occurred in the former and 42 cases with 7 deaths in the latter year. The years 1902 and 1903 passed without the occurrence of a single case. On June 12th, 1904, a boy, 11 years of age, was notified as suffering from Diphtheria. This boy had been a few days before the onset of his illness assisting his father in his occupation of emptying the ashpits in the district for which he is a contractor. Whether he contracted the infection while working with his father or was infected by some visitor to the village or by some person in Sheffield where he had been on June 4th, there is no doubt that he must have almost immediately transferred infection to a few of his schoolmates, for on examining the children in school I found one boy suffering from a sore throat and nasal discharge, whom I excluded from school as a suspicious case. This boy was subsequently notified. Swabs were also taken from the throats of seven other children, of which two showed the presence of diphtheria bacilli and three of pseudo-diphtheria bacilli. On June 25th I was informed of the absence of another child on account of sore throat, which on examination was found to be a case of typical diphtheria. Two other children were certified by a medical man to be suffering from "relaxed throat." A pupil teacher was also absent on account of a severe "cold," but when I saw her she was complaining of a sore throat which presented such suspicious signs that I advised a doctor to be called in. Owing to the occurrence of these doubtful sore throats, some of which were probably cases of mild diphtheria, I considered it advisable that the school should be closed at once for three weeks and thereafter for the usual period allowed for the summer vacation. Altogether 11 cases were notified, none of which ended fatally.

The absence of Diphtheria from Wharncliffe Side for two successive years naturally gave rise to the presumption that the infection had died out. It is unlikely that the germs of the disease had remained in a latent condition in some of the children's throats or in school books, etc., for two years, and the origin of the outbreak must therefore be referred to some extraneous source. It is worthy of note in this connection that in each year the epidemic has commenced in the spring, and it may be something more than a coincidence that Wharncliffe Side is a favourite resort during the spring and summer months for Sheffield children, who picnic there



in large numbers. The village has now an excellent supply of water, but the question of the disposal of the sewage is still in abeyance, the original scheme not having been carried through owing to difficulty in obtaining the land required. A certain amount of offensiveness is undoubtedly caused during the summer months by the improper disposal of the sewage, and as new houses have been built which drain into cesspools, the whole question ought to be reconsidered at an early date.

Whether nuisance arising from stagnating sewage is capable of originating an outbreak of Diphtheria may be a matter of dispute, but there is no doubt that the spread of the infection is mainly the result of contact of susceptible children with one another. The germ of the disease being now well known, it is easy to prove that children may be attending school in an infectious condition either by reason of the mildness of the attack from which they are suffering or because, while not presenting any obvious clinical symptoms, they are nevertheless harbouring the germs of the disease in their own throats or noses. It logically follows, therefore, that school infection is most readily controlled by searching amongst the scholars for such infectious contacts, and to this end the medical officer ought to be provided with ample facilities for the bacteriological examination of swabs from doubtful throats. This involves a considerable amount of labour when cases keep constantly recurring in a school, but the time spent in this preventive school work is amply repaid in the curtailment of the epidemic spread of the disease. At Wharncliffe Side the 11 cases that occurred involved the taking and examining of 53 swabs from the patients and their more immediate contacts. By this means at least four children were prevented from returning to school in an infectious condition, and after the first few cases there was never any suspicion of school infection from the return of convalescents or their home contacts.

At Tankersley a few cases occurred, due to extension of infection from Wentworth in the Rotherham Rural District.

At Upper Midhope all the children affected were scholars attending the Langsett School in the Penistone Rural District, no case occurring amongst those children attending the school at Midhopestones.



**Typhoid Fever.**—Sicknesses and Deaths in previous years.

Year	..	1894	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904
Cases	..	6	12	20	32	37	37	25	36	14	28	22
Deaths	..	2	—	5	5	7	5	8	7	1	4	8
Fatality per cent.	}	33.3	—	25.0	15.6	18.9	13.5	32.0	19.4	7.1	14.3	36.3

There were 22 cases of Typhoid Fever notified during the year, and 8 deaths occurred, giving the high fatality rate of 36.3 per cent.

In the Ecclesfield sub-district, 17 cases were reported, of which 10 occurred at Highgreen, 2 at Chapeltown, 2 at Ecclesfield, 1 at Wadsley Bridge, 1 at Grenoside, and 1 at the South Yorkshire Asylum.

In the Bradfield sub-district there were 3 cases, and 1 each in Tankersley and Wortley.

The same difficulty was experienced as in the previous year in nursing cases of Typhoid Fever at home, and there was consequently an undue proportion of secondary cases in the households affected. Typhoid Fever is a most difficult disease to nurse in small cottage houses, the chances of infection spreading to other members of the household being very great. Thus in one family at Highgreen where the primary case was nursed at home, no fewer than three other members of the family were subsequently attacked with fatal results. Hospital accommodation ought to be available for such cases, both from the point of view of prevention and treatment.

**Erysipelas.**—Ten cases of Erysipelas were notified, but no death occurred.

**Puerperal Fever.**—Two cases of Puerperal Fever were notified, and there were two deaths.

**Smallpox.**—Two cases of Smallpox occurred. The first case occurred at Ecclesfield, being that of an unvaccinated girl, nine years of age, who contracted the infection at Brighouse. On January 12th I received a communication from the Medical Officer of Health of Brighouse, stating that this child had during a visit to Brighouse slept with a girl who had been removed to the Smallpox Hospital on January 7th. I immediately visited this child, and found that she was ill in bed and was being medically attended.

After interviewing her medical attendant, who was doubtful as to the diagnosis, I examined the child in consultation with him, and came to the conclusion that the case was Smallpox, and she was at once removed to the Barnsley Smallpox Hospital. The girl had, along with her parents, paid a visit to friends in Brighouse on December 26th, and returned home on December 30th. She commenced to feel ill on January 7th, and the rash appeared on January 11th. The notification of Smallpox contacts by one Medical Officer of Health to another is of immense value in enabling one to keep the contacts under observation during the incubation period, and to ascertain the existence of doubtful cases ; and had it not been for this communication from Brighouse it is, I think, highly probable that the case would have been treated as Chickenpox, as it was certainly a mild attack and one somewhat difficult to diagnose.

All the contacts were vaccinated or re-vaccinated, with the exception of one man, a coal miner, who, though having no objection to being re-vaccinated, refused owing to the probability of his occupation being temporarily interfered with. A point arose in this connection as to whether, in such a case, it was competent for the Council to pay compensation for temporary incapacitation from work owing to vaccination. The Local Government Board, on being communicated with, at first replied that they were not aware of any statutory authority for such a proceeding. The circular of the Board, dated September 25th, 1902, states that in their opinion, "if the other inmates of the house are vaccinated or re-vaccinated, there is no material advantage to be gained by keeping them at home, if they are kept under medical observation for a fortnight. . . . In exceptional cases, however, where it is essential that the inmates should remain in their own homes, the Board would be prepared to sanction a reasonable expenditure in securing such a result." This statement does not apparently cover the case of other contacts than those living in the same house, nor of the payment of compensation to those incapacitated temporarily by reason of vaccination. It is, of course, preferable to secure vaccination of every contact, even if compensation has to be paid for temporary inability to follow his usual occupation, than that he should remain at home for a fortnight in an unvaccinated and susceptible condition. As difficulty was experienced in other neighbouring districts in getting the amounts paid for compensation



sanctioned by the District Auditor, the Board were again communicated with, and they finally stated that "if in any particular case of the kind in question vaccination or re-vaccination should be considered by the Medical Officer of Health to be necessary, but could only be secured by payment of compensation for any loss of wages caused thereby, the Board would be prepared to consider an application for their sanction to the payment." It seems desirable, however, that the question of payment of compensation to Smallpox contacts should be placed on a proper legal basis.

The second case was that of a man employed as a ticket inspector at the Great Central Railway Station, Sheffield, whose illness commenced on May 19th, the eruption appearing on May 23rd. He was removed to the Sheffield Smallpox Hospital, and the inmates of the house were all re-vaccinated. It was impossible to trace the source of infection in this case.

No spread of the disease took place from either of these cases.

The question of hospital accommodation for cases of Smallpox arose again during the year, notice having been given by the Barnsley Corporation to terminate their agreement with the Council for admission of cases into their hospital. Application was then made to the Sheffield Corporation, who agreed to receive cases from this district under certain conditions for one year, a period that was subsequently extended for another six months. As a temporary expedient there is no objection to this arrangement, but some provision of a more permanent nature ought to be made, as Smallpox is still prevalent in the West Riding, and cases are sure to occur in this district from time to time.

**Bacteriological Examinations** in the County Laboratory were made of specimens sent from this district in 83 instances. These included 79 throat swabs from patients suffering from Diphtheria, 2 blood specimens from Typhoid Fever cases, and 2 specimens of sputum.

**General Preventive Measures.**—The general preventive measures adopted in the case of notifiable diseases were regularly carried out during the year. These embraced inquiry at the patients' abode, the distribution of printed instructions regarding the precautions to be taken, besides verbal instructions being given on special points,

the gratuitous supply of disinfectants, the disinfecting of the home, and the removal of such infected articles as required steam disinfection to the disinfector at the Isolation Hospital. The searching for unrecognised cases and the inspection, when necessary, of doubtful cases in school are also included as part of the routine measures adopted.

2.—Non-Notifiable Diseases.

Diarrhœa.—Deaths in previous years.

Year ..	1894	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904
Deaths .	4	27	20	43	42	23	43	38	6	12	14

There were 14 deaths registered as being due to Diarrhœa or Epidemic Enteritis. Of these, 12 occurred amongst children under one year of age.

One death occurred at Ecclesfield, 2 at Chapeltown, 1 at Highgreen, 1 at Grenoside, 1 at Loxley, 4 at Stannington, 1 at Dungworth, and 3 at Tankersley.

MONTHLY INCIDENCE OF DIARRHŒA DEATHS.

Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
1	—	—	1	—	—	—	7	5	—	—	—

The deaths from Epidemic Diarrhœa were not numerous, considering that the meteorological conditions were favourable to a high death rate from this cause.

The usual leaflets were distributed giving instructions regarding the precautions to be taken in the prevention of this disease.

Measles.—Deaths in previous years.

Year ..	1894	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904
Deaths..	1	21	19	19	8	3	14	15	10	10	1

Only one death occurred from Measles during the year, this disease having been less prevalent than in any year since 1894. None of the schools were closed on this account.

Whooping Cough.—Deaths in previous years.

Year ..	1894	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904
Deaths..	10	11	6	12	5	4	18	12	9	5	9

Nine deaths occurred from Whooping Cough, 6 occurring at Grenoside, 2 at Highgreen, and 1 at Wadsley Bridge.



This disease was prevalent chiefly at Grenoside, Highgreen, and Warren. At Grenoside the children attending the Infant Department of the Provided School were so seriously affected that closure of this department for six weeks was deemed necessary. This measure was successful in checking the further spread of the disease.

**Schools and Infectious Disease.**—During the year notices were received from head teachers of almost all the schools in the district referring to absences of children on account of the following causes :—

Whooping Cough	..	..	..	105
Measles	..	..	..	2
Scarlet Fever	..	..	..	11
Diphtheria	..	..	..	4
Sore Throat	..	..	..	48
Rash	..	..	..	2
Ringworm	..	..	..	3
Mumps	..	..	..	5
Chickenpox	..	..	..	2

### III.—GENERAL SANITATION.

#### The Isolation Hospital, Grenoside.

During the year 104 cases were admitted to hospital, viz. :—Scarlet Fever, 89 ; Diphtheria, 10 ; Typhoid Fever, 5. One case of Scarlet Fever and three of Typhoid Fever remained over from last year, the total number treated being 108. Of these, 74 recovered, 7 died, and 27 remained in hospital at the end of the year. The deaths included 3 of Scarlet Fever, 1 of Diphtheria, and 3 of Typhoid Fever.

Of the Scarlet Fever cases, 10 per cent. were of a severe, anginous type, two being moribund on admission. The more important complications were :—Otitis Media, 7 ; Arthritis, 2 ; Endocarditis, 2 ; Suppurating Adenitis, 1 ; Orbital Cellulitis, 1 ; Broncho-pneumonia, 2 ; Chickenpox, 2.

During the last 4 years, 353 cases of Scarlet Fever have been admitted to hospital, of which only 3 have died, equivalent to the exceedingly low fatality rate of 0.85 per cent. This contrasts very favourably with the experience of cases treated in their own homes. During the same period 119 cases were treated at home, of which 5 died, equal to a percentage fatality rate of 4.2. The hospital results have thus been excellent so far as the recovery of the patients is concerned. The large proportion of admissions during the year—equal to 92 per cent. of the total notifications—testifies to the appreciation of the hospital by the public. Very little difficulty is now experienced in persuading parents to send

their children to hospital when suffering from Scarlet Fever, and frequently regret has been expressed to me that the accommodation for Diphtheria and Typhoid Fever was so limited that it was often impossible for cases of these diseases to be admitted.

In my last year's report I showed that the removal of a child to hospital gave the children remaining in the house a much better chance of escaping Scarlet Fever than if the child was treated at home. The same experience has been repeated this year, the attack rate on susceptible children under 15 years of age remaining after the primary case was removed to hospital being only 9.4 per cent., as compared with 40 per cent. when the child was left at home. As the figures for home-treated cases this year are very small, a fairer comparison is obtained by adding the figures for 1904 to those for the previous three years, thus—

	Primary Cases.		Susceptible persons remaining		Secondary Cases.		Attack rate per cent. on susceptible persons remaining	
	Under 15 years	Over 15 years	Under 15 years	Over 15 years	Under 15 years	Over 15 years	Under 15 years	Over 15 years
Home								
Cases ..	84	8	128	220	22	3	17.1	1.4
Hospital								
Cases ..	234	21	446	497	35	3	7.8	0.6

The attack rate on susceptible children is thus only 7.8 per cent. when the case is removed to hospital, as compared with 17.1 per cent. when the case is left at home. To the individual family the advantage obtained by isolation of the infected child in hospital is really greater than is shown by these figures, because other factors which cannot be statistically estimated—such as the interference with domestic arrangements, with the education of the children and sometimes with the occupation of the parent, the anxiety of home nursing, the delayed convalescence owing to the necessarily indoor isolation of the patient, and so forth—are all of importance to the persons concerned. If the individual family benefits, the district also must benefit, unless hospital isolation has the effect of prolonging the infectiousness of the patient. There is no evidence in support of this theory from the last three years' experience, as only one case occurred during that time in the same family within one month of the discharge of the patient from hospital.

**Water Supply.**—The rainfall during the year was very low, only 23.9 inches having fallen at Potter Hill, as compared with 33.5 inches in 1903. Rain fell on 165 days, and February and August were the wettest months.

Almost all the populous localities being now well supplied with water, attention is being directed to the improvement of the supply to the smaller villages, and some progress is made each year.



During the year the new service tank for the Oughtibridge supply was completed, and there is now no reason why water should not be laid on to all the houses, instead of being, as formerly, supplied in street stand-pipes. Some owners of property have already had their houses connected with the mains, and it is to be hoped that others will soon adopt the same course.

The Worrall mains were extended from Haggstones to Common-side, Oughtibridge, so that the hamlet of Four Acres and the upper part of Oughtibridge, which were formerly dependent on sources liable to pollution, will now be able to tap the excellent supply from Hallbroom.

Most of the houses in Rotherham Road, Brackenhill, were, during the year, connected with the main, which was laid down for this purpose by arrangement with the Sheffield Corporation.

The scheme proposed some time ago by T. H. Bingley, Esq., for supplying the hamlets of Whitley, Woodend, and Middleton Green, was at length completed, and water was laid on to almost all the cottages.

The supply to the village of Low Shiregreen was reported by me to be inadequate, and some of the wells were liable to pollution. An arrangement was made with the Sheffield Corporation for an extension of the main in Grange Lane, the usual guarantee being given by the District Council. The main was laid towards the end of the year, and already one dairy farm and several cottages have had water laid on.

Three cottages at Wadsley were also supplied with water from the Sheffield Corporation mains along with others within the City boundary.

One house in Bradfield district was newly erected without a supply of wholesome water within a reasonable distance being obtained, and the Council refused to give the necessary certificate required under The Public Health (Water) Act, 1878, before the house could be occupied. The owner thereupon applied to the Magistrates, under Section 6, for an order authorising the occupation of the house, notwithstanding the refusal of the certificate by the Council, and at the hearing the Magistrates refused to give such an order, and dismissed the case. To this house rain water from a few open wooden tubs was laid on through a lead pipe to the kitchen sink, and the nearest available supply of wholesome water was 440 yards away, and approached by a road with a very steep gradient. Various proposals for the improvement of the supply were made by the owner, which were considered by the Council to be inadequate, and after some time the owner occupied the house. The Council in turn summoned the owner for occupying the house without having received a certificate, and a fine of £10 was imposed by the Court.

**Sewerage and Sewage Disposal.**—Sewer extensions were carried out during the year at Greenhead Lane, Chapeltown.

The scheme for disposing of the sewage of Wharncliffe Side, which received the sanction of the Local Government Board early in the year, has not yet been proceeded with, owing to the owner at the last moment refusing to sell the land required for the disposal works. It is undoubtedly difficult to obtain a suitable site for such purposes in a narrow valley other than that selected, but it is to be hoped the scheme will not be unduly delayed owing to this difficulty.

**Excrement Disposal and Scavenging.**—The scavenging work, which is undertaken by various contractors for almost the whole district, has been carried out in a more efficient manner than formerly, and very few complaints have been received. Sufficient care is not, however, always taken regarding the disposal of ashpit refuse, which is at times dumped down or spread on fields without any covering of earth, and in too close proximity to dwelling houses. It would in many respects be more satisfactory for “tips” to be found in certain populous localities for this purpose, as it is difficult always to ensure that the contractors will exercise sufficient care in the proper disposal of this refuse.

**Nuisances.**—During the year 28 nuisances received attention, of which 14 were abated. Amongst the latter were four cases of overcrowding.

**Offensive Trades.**—The Bye-laws for the regulation of slaughter houses within the district received the sanction of the Local Government Board towards the end of the year.

No complaint arose regarding any of the existing registered or licensed slaughter houses.

**Unsound Food.**—One seizure was made of unsound ham and bacon that had been sold at a public auction sale in the Bradfield district, and the food was condemned by a magistrate and destroyed. No prosecution followed.

**Dairies and Cowsheds.**—Further progress was made during the year in supervising the cowsheds and in bringing them up to the standard required by the Regulations. More attention is, I think, now being paid by the farmers to the cleanliness of the premises and in some respects of the cows, though much more ought to be attempted in this latter direction. The cows, which look and are kept fairly clean while grazing during the summer months, become, many of them, very dirty while stabled during the winter months, but this could readily be prevented by more care in bedding and grooming. Inspection was specially made of a few cowsheds at milking hours to see whether the Regulations as



to the washing of the milker's hands and the cow's udder were being carried out, and the report of the inspector was generally favourable. It is, however, a difficult regulation to enforce in a large area, and occasional inspection at milking hours is all that can be attempted at the present time. During the year seven cowsheds were reconstructed or repaired.

**Diseases of Animals Act, 1894.**—Only one outbreak of Anthrax in the Bradfield district was reported during the year.

**New Buildings.**—Plans were passed for 127 new buildings and one new street. These were mostly cottage houses, but also included one school and one chapel. Forty-one plans were passed for sundry alterations and extensions. Twelve breaches of the Building Bye-laws were dealt with.

**Housing of the Working Classes.**—No houses were this year represented as unfit for habitation.

One cottage at Ecclesfield, previously condemned, remained closed. One house at Chapeltown was put in a proper state of repair; others of this same group remained closed.

Owing probably to the depression in trade, there were more unoccupied houses in the district than has been the case for several years, but most of the new houses erected just outside the Sheffield boundary become tenanted almost as soon as they are completed. Except at Tankersley, the erection of cottages suitable for the working classes seems to keep pace with the increase of the population, and the character of these is, with a few exceptions at Chapeltown and Ecclesfield, fairly good.

**Common Lodging Houses.**—The only common lodging house in the district was inspected and found in a fairly satisfactory condition.

**Burial Accommodation.**—Success has attended the efforts of the Bradfield Parish Council, who, having adopted the Burial Acts, have selected a suitable site for providing additional burial ground for Oughtibridge. The site has been approved by the Local Government Board, who, after holding a local inquiry, have sanctioned the borrowing of the money required.

**Factories and Workshops.**—There are now on the Register 121 workshops in the district, viz.:—File cutters and forgers, 61; cutlers, 12; razor scale pressers, 15; bakers, 5; dressmakers, tailors, etc., 15; joiners, plumbers, etc., 13. One bakehouse and one dressmaker's workshop were disused during the year. No notices of occupation of new workshops have been received from the Factory Inspector.

The enforcement of the Regulations made for workshops where files are cut by hand apparently devolves on the Factory Inspector. I have, however, inspected many of these workshops, and I have found that their condition has materially improved since the Regulations came into force, especially as regards the construction of the floors, diminution of overcrowding, and general cleanliness. Some of the small workshops, where only two persons work, do not yet appear to have complied with the Regulations, but, being "tenement workshops" according to the definition in the Act, they are not exempt from the requirements specified in the Regulations. There is not much that calls for comment this year in regard to the sanitary state of the other workshops. They were all found in a satisfactory condition, as regards cleanliness and absence of overcrowding, and a distinct improvement was observed in the razor scale pressing workshops in the former respect.

There was, prior to the commencement of the current year, only one underground bakehouse in the district, for which the District Council refused to grant a certificate of suitability. This is now disused, a room on the ground floor being converted into a baking room, which complies with the requirements of the Act.

One bakehouse, in which oatmeal cakes are baked and subsequently sold in the neighbouring villages, but to which no shop is attached, was repaired and put in a sanitary condition.

Two lists of outworkers in the file-cutting trade were received from the Sheffield Sanitary Authority. These lists comprised the names of 112 outworkers, but as each list was incomplete, only 21 names being repeated in the second list, the actual number of outworkers notified was 91, as compared with 133 in 1903. Very few of the outworkers, however, work in their own homes, the majority working in small shops in the gardens attached to their dwelling houses, so that almost all the outworkers are working in shops already subject to the file-cutting regulations.

No workshop was found which failed to comply with the Section of the Act requiring the posting up of the prescribed abstract of the Act, and in which any woman, young person, or child was employed.

Appended are the Statistical Tables required by the Local Government Board.



TABLE I.

## Vital Statistics of Whole District during 1904 and previous Years.

## WORTLEY RURAL DISTRICT.

YEAR.	Population estimated to Middle of each Year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.					TOTAL DEATHS IN PUBLIC INSTITU- TIONS IN THE DISTRICT.	Deaths of Non- residents registered in Public Institu- tions in the District.	Deaths of Residents registered in Public Institu- tions beyond the District.	NETT DEATHS AT ALL AGES BELONGING TO THE DISTRICT.	
				Under 1 year of age.		At all ages.							
		Number.	Rate.*	Number.	Rate per 1000 Births registered.	Number.	Rate.*	Number.	Rate.*				
		1	2	3	4	5	6	7	8	9	10	11	12
1894	39,695	1200	30.2	151	126	617	15.5		132		485	12.2	
1895	40,605	1256	30.9	175	139	794	19.5		155		639	15.7	
1896	41,539	1324	31.8	186	140	745	17.9		165		580	13.9	
1897	42,499	1335	31.4	194	145	874	20.5		208		666	15.6	
1898	43,483	1362	31.3	211	154	818	18.8		181		637	14.6	
1899	44,494	1413	31.7	194	137	898	20.1		193		705	15.8	
1900	45,532	1429	31.3	244	170	990	21.7	256	205	13	798	17.5	
1901	43,786	1463	33.4	192	131	836	19.1	216	192	17	661	15.0	
1902	30,057	937	31.1	115	122	582	19.3	217	195	6	393	13.7	
1903	30,375	962	31.6	123	127	589	19.3	214	198	10	401	13.2	
Averages for years 1894-1903	40,206	1268	31.5	178	140	774	19.2		182		592	14.7	
1904	30,698	949	30.9	115	122	600	19.5	205	171	11	440	14.3	

\* Rates in Columns 4, 8, and 13 calculated per 1,000 of estimated population.

NOTE.—The deaths included in Column 7 of this Table are the whole of those registered during the year as having actually occurred within the district or division. The deaths included in Column 12 are the number in Column 7, corrected by the subtraction of the number in Column 10 and the addition of the number in Column 11.

Area of District in acres (exclusive of area covered by water)—52,230.

Total Population at all ages at Census of 1901—29,665.

Number of Inhabited Houses at Census of 1901—5,513.

Average number of persons per house at Census of 1901—5.3.

I. Institutions within the District receiving sick and infirm persons from outside the District—South Yorkshire Asylum; Workhouse, Grenoside.

II. Institutions outside the District receiving sick and infirm persons from the District - Royal Infirmary, Sheffield; Jessop Hospital, Sheffield; Firvale Infirmary; Royal Infirmary, Manchester; Barnsley Hospital.

III. Other Institutions the deaths in which have been distributed among the several localities in the District—Workhouse, Grenoside; Isolation Hospital, Grenoside.

IV. Is the Union Workhouse within the District?—Yes.



TABLE II.

Vital Statistics of separate Localities in 1904 and previous years.

## WORTLEY RURAL DISTRICT.

NAMES OF LOCALITIES.	WHOLE DISTRICT.				ECCLESFIELD Registration Sub-District.				BRADFIELD Registration Sub-District.				WORTLEY and TANKERSLEY Registration Sub-District.			
	Population estimated to middle of each Year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.
Year.																
1894 1895 1896 1897	a	b	c	d	a	b	c	d	a	b	c	d	a	b	c	d
	43,483	1362	637	211	31,646	1013	472	164	8436	251	118	33	3401	98	47	14
	44,494	1413	705	194	32,536	1044	521	145	8549	256	132	32	3409	113	52	17
	45,532	1429	798	244	33,451	1076	614	201	8664	257	140	30	3417	96	44	13
	43,786	1463	661	192	31,778	1108	497	162	8581	254	130	31	3427	105	43	10
1901																
1902	30,057	937	393	115	18,543	600	230	69	8078	229	121	33	3436	108	42	13
1903	30,375	962	401	123	18,720	636	254	85	8210	218	105	30	3445	108	42	8
Averages of Years 1898 to 1903																
	39,621	1261	599	179	27,779	913	431	137	8419	244	124	31	3422	101	45	12
1904	30,698	949	440	115	18,898	634	292	87	8345	214	99	18	3455	101	49	10



TABLE III.

Cases of Infectious Diseases notified during the Year 1904.

## WORTLEY RURAL DISTRICT.

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.						TOTAL CASES NOTIFIED IN EACH LOCALITY.			No. OF CASES REMOVED TO HOSPITAL FROM EACH LOCALITY,		
	At all ages.	At Ages—Years.					1 Ecclesfield (H.W.)	2 Bradfield	3 Wortley and Tankersley	1 Ecclesfield	2 Bradfield	3 Wortley and Tankersley
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.						
Small-pox ..	2			1		1	2			2*		
Cholera ..												
Diphtheria ..	33		6	21	5	1	5	19	9	2	6	2
Membranous Croup ..												
Erysipelas ..	10				2	8	6	2	2			
Scarlet Fever ..	96		25	62	7	2	69	25	2	65	22	2
Typhus Fever ..												
Enteric Fever ..	22			7	5	10	17	3	2	3	2	
Relapsing Fever ..												
Continued Fever ..												
Puerperal Fever ..	2					2	1	1				
Plague ..												
TOTALS ..	165		31	91	19	24	100	50	15	72	30	4

Isolation Hospital—Grenoside (in Ecclesfield Sub-District).

\* Small-pox cases were removed, one to Barnsley Small-pox Hospital and one to Sheffield Small-pox Hospital.

TABLE IV.

Causes of, and Ages at, Death during Year 1904.

## WORTLEY RURAL DISTRICT.

CAUSES OF DEATH.	DEATHS IN OR BELONGING TO WHOLE DISTRICT AT SUBJOINED AGE.							DEATHS IN LOCALITIES (AT ALL AGES).			Total Deaths in Public Institutions in the District.
	All ages	Under 1 year	1 and under 5	5 and under 15	15 and under 25	25 and under 65	65 and upwards	Ecclesfield	Bradfield	Wortley and Tankersley	
Small-pox .. .. .	..	..	..	..	..	..	..	..	..	..	..
Measles .. .. .	1	..	1	..	..	..	..	1	..	..	..
Scarlet fever .. .. .	4	..	2	2	..	..	..	4	..	..	3
Whooping-cough .. .. .	9	5	3	1	..	..	..	9	..	..	..
Diphtheria and membranous group .. .. .	5	..	1	3	1	..	..	2	1	2	1
Group .. .. .	1	..	1	..	..	..	..	1	..	..	..
Typhus .. .. .	..	..	..	..	..	..	..	..	..	..	..
Enteric .. .. .	8	..	..	4	1	3	..	7	1	..	4
Other continued .. .. .	..	..	1	..	..	..	..	..	1	..	..
Epidemic influenza .. .. .	1	..	..	..	..	..	..	..	..	..	..
Cholera .. .. .	..	..	..	..	..	..	..	..	..	..	..
Plague .. .. .	..	..	..	..	..	..	..	..	..	..	..
Diarrhoea .. .. .	14	12	2	..	..	..	..	6	5	3	..
Enteritis .. .. .	10	8	..	..	..	..	2	8	1	1	2
Puerperal fever .. .. .	2	..	..	..	1	1	..	2	..	..	..
Erysipelas .. .. .	..	..	..	..	..	..	..	..	..	..	..
Other septic diseases .. .. .	7	2	..	..	..	3	2	5	2	..	3
Other septic diseases Phthisis (Pulmonary Tuberculosis) .. .. .	31	1	..	1	5	22	2	21	7	3	23
Other tubercular diseases..	11	4	2	1	..	3	1	6	3	2	2
Cancer, malignant disease.	17	..	..	..	..	10	7	10	5	2	5
Bronchitis .. .. .	26	7	2	..	1	6	10	17	6	3	3
Pneumonia .. .. .	47	14	19	1	..	8	5	37	8	2	11
Pleurisy .. .. .	..	..	..	..	..	..	..	..	..	..	..
Other diseases of Respiratory organs .. .. .	11	..	..	..	..	7	4	5	4	2	14
Alcoholism .. .. .	2	..	..	..	..	2	..	2	..	..	..
Cirrhosis of liver } .. .. .	..	..	..	..	..	..	..	..	..	..	..
Veneral diseases .. .. .	..	..	..	..	..	..	..	..	..	..	..
Premature birth .. .. .	23	23	..	..	..	..	..	18	3	2	..
Diseases and accidents of parturition .. .. .	5	..	..	..	1	4	..	4	1	..	..
Heart diseases .. .. .	43	..	..	3	1	17	22	26	10	7	16
Accidents .. .. .	13	2	..	1	2	7	1	6	2	5	..
Suicides .. .. .	5	..	..	..	1	3	1	3	..	2	..
Old age .. .. .	29	..	..	..	..	..	29	16	11	2	1
Diseases of nervous system .. .. .	56	13	5	5	1	14	18	40	12	4	87
Diseases of alimentary system .. .. .	7	2	..	2	..	2	1	5	..	2	8
Developmental diseases .. .. .	25	22	2	..	1	..	..	17	5	3	..
All other causes .. .. .	27	..	1	4	4	12	6	14	11	2	22
All causes .. .. .	440	115	42	28	20	124	111	292	99	49	205